

UNITED STATES DISTRICT COURT
for the
DISTRICT OF MASSACHUSETTS

PRINCESS CEDENO

Plaintiff

v.

Civil Action No.:
1:13-CV-12510-JGD

CALVARY PORTFOLIO SERVICES, LLC, ET AL.

Defendant

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

ROBERT M. FARRELL

CLERK OF COURT

/s/ – Kimberly M. Abaid

Signature of Clerk or Deputy Clerk



Civil Action No.: 1:13-CV-12510-JGD

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

This summons for (name of individual and title, if any) Allied Collection Services Inc.
was received by me on (date) 10/15/13.

I personally served the summons on the individual at (place) _____

on (date) _____ ; or

I left the summons at the individuals residence or usual place of abode with (name) _____

, a person of suitable age and discretion who resides there,
on (date) _____, and mailed a copy to the individuals last known address; or

I served the summons on (name of individual) _____, who is
designated by law to accept service of process on behalf of (name of organization) _____

on (date) _____ ; or

I returned the summons unexecuted because _____ ; or
I mailed a copy of summon an
 Other (specify): Via US postal Service, Green
Receipt.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

10/16/13
Date

Mark A. Odeo
Server's Signature

Server's Signature
Innocent Cedeno (husband)
Printed name and title

658 W. Main St, Ash, Ma, 02322
Server's Address

Additional information regarding attempted service, etc:

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  C. Date of Delivery 10.21</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>1. Article Addressed to: <i>Allied Collection Services Inc 1607 Central Avenue columbus, In, 47201</i></p> <p>2. Article Number <i>(Transfer from serv.)</i> 7012 3050 0000 7248 4258</p>	
		<p>3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540